See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services Toxic Substances Control Division

4	LINFORM HAZARDOUS 1. Generator's US EPA ID No.	Manifest	2.	Page 1	ntion is	Sacramento, Californ		
A NAME OF THE PARTY OF THE PART	ASTE MANIFEST CAD 981 387 988 Do 13. otor's Name and Mailing Address	DOCUMENT NO.		mom		the shaded areas by Federal law.		
	UMBIA SHOWCASE			A. State Manifest Document Number 88684614				
1 1	4. Ganerator's Phone (213 875-1210	2	B. State Generator's ID					
550	and the second s	6. US EPA ID Number CAD 042 245 001			C. State Transporter's ID			
52-7	7 Transporter & Community	D. Transporter's Phone 213 698-0991						
1.800-852-7550	E. State Transporter's ID							
	9. Designated Facility No. rice and Site Address 10. US EPA ID Number G. State Facility's ID							
CALL	12504 E. WHITTIER BLVD CAD 0 4 2 2 4 5 0 0 / 1							
EOFINIA IFORNIA	WHITTIER, CA 90602 CAD 042 245 001 213 698-0991							
OF.	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Cont	1	13. Total Quantity	14. Unit	L. Waste No.		
24Z	WASTE METHYL ETHYL KETONE, FLAMMABLE	NO.	Туре		Wt/Vol	State		
	LIQUID, UN 1493	and a	DM	6 50		212 EPA/Other		
~ E	b.	4004		90131210	6	F003 State		
;-800-424-8802;	*					EPA/Other		
0-42	C.	+				State		
80						EPA/Other		
CENTER	d.					State		
, 56						EPA/Other		
NSE	J. Additional Descriptions for Materials Listed Above	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	K. Ha	ndling Codes for W	astes L			
RESPONSE		8.	· Ø/: ·					
			C.		d.	in the state of th		
NATIONAL	15. Special Handling Instructions and Additional Information			est of the second				
THE NA	PROFILE NUMBER B 10233							
CALL T								
- 1	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are already are classified, packed, marked, and labeled, and are in all respects in process and labeled.	- 4lb.,d						
SPILL	and are classified, packed, marked, and labeled, and are in all respects in proper condition for national government regulations.	or transport b	y highw	described above b ay according to app	y prope	r shipping name international and		
B .	If I am a large quantity generator, I certify that I have a program in place to reduce the volume to be economically practicable and that I have selected the practicable method of treatment, present and future threat to human health and the optimizers of the threatment.							
NCY	generation and select the best waste management method that is available to me and that I		ve made	e a good faith effor	t to mini	imize my waste		
EMERGENCY	Frinted/Typed Name Signature			The same state of the same state of		Month Day Year		
	17. Transporter 1 Acknowledgement of Receipt of Materials		ALLES TO SERVICE AND ADDRESS OF THE PARTY OF		-	DISPIRATION		
A A	Printed/Typed Name	11				Month Day Year		
E OF O d w	18. Transporter 2 A knowledgement of Receipt of Materials 18. Transporter 2 A knowledgement of Receipt of Materials							
SAS	Printed/Typed Name Signature					Month Day Year		
Z R	19. Discrepancy Indication Space			etti kanna olas, ya 1964 wasa basaninga ya 1964 wasa	- Para Para Para Para Para Para Para Par			
F								
A C	***							
	Facility Owner or Operator Certification of receipt of hazardous materials covered by this mar	nifest excent	es pote	d in Item 19	S SOMEON STREET			
	Printed / Typed Name				SPACIFICATION OF THE	Month Day Year		
DHS 8022 A	DHS 8022 A (1/88) N. JAY SOLOMON Signature DIS Joy Solomo DIS 1015 19 / 1							
DHS 8022 A (1/88) EPA 8700—22 Do Not Write Below This Line								

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(Rev. 9-88) Previous editions are obsolete.

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS